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WHC-CM-2-14

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H6-08

0303C

TITLE: Hazardous Material Packaging and Shipping

RELEASE NO.: N/A

DATE PREPARED: January 21, 1997

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Dave Lucoff

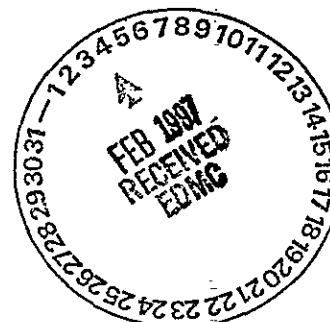
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1. REMOVE AND/OR INSERT INDICATED SECTIONS INTO DOCUMENT AS SHOWN BELOW.
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SECTION NO. AND TITLE(S)	REMOVE			INSERT		
	PAGES	REV	DATE	PAGES	REV	DATE
<p>Place this Management Directive in the front of this manual.</p> <p>This Directive is place in each of the manuals approved by FDH as a means of alerting all employees of these changes.</p> <p>This Management Directive is to provide interim guidance to ensure identifying and reporting of a noncompliance.</p>						
HNF-MD-006, Identifying/Reporting a DOE Nuclear Safety Requirement Noncompliance	--	--	--	1 -5	0	1/13/97

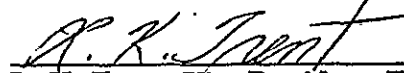
IMPLEMENTATION NOTICE



Subject:

Identifying/Reporting a DOE Nuclear
Safety Requirement Noncompliance

Approved by:


L. K. Trent, Vice President, ES&H
Fluor Daniel Hanford

1.0 PURPOSE

Effective October 1, 1996, Fluor Daniel Hanford (FDH) (the Project Hanford Management Contract [PHMC] prime contractor) and its major subcontractors will assess compliance with DOE nuclear safety requirements promulgated under the Price-Anderson Amendments Act (PAAA) using a process similar to that described in HNF-IP-1112, *Nuclear Safety Rule Compliance Manual*. Under the PAAA, the prime contractor must assure compliance by subcontractors; however, under the Management and Integration (M&I) structure, the prime contractor does not have direct responsibility for facility operations. This management directive provides interim guidance to ensure identifying and reporting of a noncompliance. When a final process has been defined, approved, and implemented, this management directive will be canceled.

Major subcontractors who operate nuclear and radiological facilities and the associated facility management teams are responsible and accountable for compliance with DOE nuclear safety requirements. Compliance with these requirements is defined by *QA Implementation Plan*, HNF-SP-1131, Revision 1, and the *Radcon Implementation Plan*, HNF-SP-1145, Revision 1, both of which remain in force. All identified noncompliances with either of the implementation plans must be reported and corrected in accordance with the process outlined in Section 3.0 of this directive.

If the impact or potential impact of a noncompliance is judged to be low (below Severity Level III as defined in Title 10, Code of Federal Regulations, Part 820 (10 CFR 820) Appendix A, "General Statement of Enforcement Policy, section VI-Severity of Violations"), then it will be reported to the contractor database maintained by the PHMC, known as the PHMC Noncompliance Database. The PHMC will maintain this database of minor noncompliances identified by the PHMC, subcontractors, and suppliers. Identified noncompliances of impact (or potential impact) greater than Severity Level III will be reported to the DOE Office of Enforcement and Investigation via the Noncompliance Tracking System (NTS). The PHMC will submit all NTS reports whether solely a PHMC report, a joint PHMC-subcontractor report, or solely a subcontractor report.

2.0 KEY RESPONSIBILITIES

- 2.1 As the "Regulatory Executive Officer" for the integrating contractor, the vice president, Environmental, Safety & Health (ES&H) is the point of contact with RL and DOE/HQ for all PAAA issues. The vice president, ES&H is responsible for the overall process that ensures reporting of noncompliances is carried out effectively by the PHMC and its subcontractors and suppliers. This includes approval/concurrence of a PHMC and/or subcontractor response to a Notice of Violation (NOV). The vice president, ES&H, is also responsible for receiving, distributing, and responding to DOE requirements relating to nuclear safety.

- 2.2 Legal Services (Fluor Daniel Hanford or major subcontractors) is responsible for providing legal interpretations of 10 CFR 820 and associated DOE nuclear safety requirements for the benefit of the PHMC.
- 2.3 The manager, Nuclear Safety Regulatory Compliance (NSRC) is responsible for making the final determination of the significance of potential noncompliances to nuclear safety requirements and developing an overall framework for specific rule implementation plans and exemption requests. In addition, the manager, NSRC serves as the interface with the DOE Field/Operations Office PAAA coordinator and reviews and validates statements of fact in correspondence with the DOE Office of Enforcement and Investigation.
- 2.4 Major subcontractors who operate nuclear and radiological facilities and the associated facility management teams are responsible and accountable for ensuring facility compliance with DOE nuclear safety requirements including activities performed by subcontractors and suppliers.
- 2.5 The interpretive authority (identified by the PHMC and assigned to specific S/RID functional areas) for a specific DOE nuclear safety requirement is responsible for providing technical interpretation and guidance for compliance to that DOE nuclear safety requirement. The interpretive authority for the two requirements currently in law are 10 CFR 835-the director, Radiation Protection (FDH) and 10 CFR 830.120-vice president, Quality Assurance (FDH). The interpretive authority will review facility-identified PAAA noncompliances and confirm them as PAAA noncompliances, and concur with proposed compensatory and corrective actions. Correspondence with DOE relating to PAAA issues in the interpretive authority's area will be reviewed and approved by the interpretive authority. It is recognized that facility management will consult with facility and subcontractor experts concerning compliance posture and the need to report specific findings and events; however, the interpretive authority is the final authority on matters of compliance with a particular element of a DOE nuclear safety requirement.

3.0 PROCESS FOR PAAA NONCOMPLIANCE IDENTIFICATION AND REPORTING

- The process outlined in this section roughly corresponds to the process described in HNF-IP-1112, *Nuclear Safety Rule Compliance Manual*. For further elaboration on some of the process areas discussed below, this manual may be consulted. HNF-IP-1112 will be succeeded by the PHMC company level procedure that will replace this management directive.
- 3.1 Facility management will review facility occurrence reports, work activities reports, safety system status/performance reports, work planning packages (including ALARA recommendations and pre-job briefings), and all management self-assessments and independent assessments to identify potential noncompliances with DOE nuclear safety requirements.
 - 3.2 When facility management identifies a potential noncompliance, the specific issue should be evaluated by the interpretive authority(ies) for the requirement area(s) involved to determine if, in fact, a noncompliance has occurred.
 - 3.3 After a noncompliance has been confirmed by the appropriate facility expert and the interpretive authority, facility management shall report the noncompliance to the associated subcontractor PAAA coordinator or designated alternate who shall report the noncompliance

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Safety Requirement Noncompliance**

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Effective Date: January 13, 1997

to FDH NSRC for disposition to the PHMC Noncompliance Database or to the NTS as a significant noncompliance. The FDH project director should also be notified by the subcontractor if it looks like the noncompliance might be serious enough to be reported to the DOE Office of Enforcement and Investigation.

NSRC will maintain the PHMC noncompliance database for all facilities (and subcontractors) affiliated with the PHMC. Facility management shall provide weekly summary reports of PAAA review activities to NSRC; a suggested screening report form is attached. The weekly summary should be the collection of the screening forms (including items found not to have PAAA implications, i.e., "N/A") for that week. Facility management may recommend classifying a noncompliance as minor or significant; however, the manager of NSRC, in consultation with the affected subcontractors and the interpretive authority, will make the final determination of significance of all noncompliances. DOE expectation is that within 20 calendar days of identifying a noncompliance as being significant the noncompliance will be submitted to the NTS.

If a subcontractor requests that a noncompliance, associated with one of its operations and determined by the manager, NSRC to be a minor noncompliance, be reported to the NTS in order to protect its corporate interest, then the noncompliance will be reported to the NTS. Similarly, if a subcontractor requests that an event, associated with one of its operations and determined by the interpretive authority to not constitute noncompliance, be reported as a noncompliance in order to protect its corporate interest, then the noncompliance will be reported to the PHMC noncompliance database or to the NTS. Other differences of opinion will be referred to the vice president, ES&H for resolution.

- 3.4 After a noncompliance has been identified and reported, facility management, with concurrence from the interpretive authority, shall immediately determine compensatory actions needed (if any) and the appropriate corrective actions that will restore the facility to a compliant status and will prevent recurrence. If the noncompliance was minor, i.e., less severe than Severity Level III as defined in 10 CFR 820 Appendix A, "General Statement of Enforcement Policy, section VI-Severity of Violations", corrective actions will be entered into the corrective action database, Hanford Action Tracking System (HATS), and tracked to completion. If the noncompliance was significant, the corrective actions will be entered into NTS and tracked as PAAA commitments to completion.

Except in unusual circumstances, facility management should take less than 25 calendar days from the time a noncompliance is reported in NTS to define corrective actions; during this period identified compensatory actions shall be in place. Corrective actions for a significant noncompliance will be reviewed by the appropriate PHMC interpretive authority for possible site-wide application. The interpretive authority is also responsible for preparing and disseminating "lessons learned" from a reported significant noncompliance.

COMPLIANCE OFFICER REPORT

Source Identifier: RL--PHMC-_____-1996-_____-

or

If other than ORPS: Plant Name + Identifier (B-Plant FEB Report 96-004)

Evaluator: _____

Date Discovered: _____ (mm/dd/yy)

Tracking Category: (check as appropriate)

☐ In Review

☐ Minor Noncompliance*

☐ Update

☐ N/A

☐ Significant Noncompliance*

* Reviewed by Interpretive Authority

Key Words: Select up to three from the following list that best characterize the item being screened.

☐ OSR Violation

☐ Procedure Noncompliance

☐ Contamination-Area/Equipment

☐ Criticality Alarm

☐ Surveillance

☐ Security

☐ High Radiation Area

☐ Other _____

☐ OSD Violation

☐ Equipment Failure

☐ Contamination-Personnel

☐ RWP Noncompliance

☐ Personnel Exposure

☐ Work Processes

☐ USQ

Date Determined to be N/A or a PAAA Noncompliance: _____ (mm/dd/yy)

If it has been determined that this is a noncompliance, answer the following questions.

Rule Involved: (check as appropriate)

☐ 10 CFR 830.120 (QA)

☐ 10 CFR 835 (Rad Con)

Comment:

SAMPLE--->

COMPLIANCE OFFICER REPORTSource Identifier: RL-PHMC-_____-1996-_____
orIf other than ORPS: Plant Name + Identifier (B-Plant FEB Report 96-004)DOE Technical Position on Surface Radioactivity
Values.../September 24, 1996Evaluator: DM Lucoff/376-5457Date Discovered: 10/21/96 (mm/dd/yy)

Tracking Category: (check as appropriate)

☐ In Review ☐ Minor Noncompliance* ☐ Update☒ N/A ☐ Significant Noncompliance*

* Reviewed by Interpretive Authority

Key Words: Select up to three from the following list that best characterize the item being screened.

- | | |
|----------------------------------------------------------------------|--------------------------------------------------|
| <input type="checkbox"/> OSR Violation | <input type="checkbox"/> OSD Violation |
| <input checked="" type="checkbox"/> Procedure Noncompliance | <input type="checkbox"/> Equipment Failure |
| <input checked="" type="checkbox"/> Contamination-Area/Equipment | <input type="checkbox"/> Contamination-Personnel |
| <input type="checkbox"/> Criticality Alarm | <input type="checkbox"/> RWP Noncompliance |
| <input type="checkbox"/> Surveillance | <input type="checkbox"/> Personnel Exposure |
| <input type="checkbox"/> Security | <input type="checkbox"/> Work Processes |
| <input type="checkbox"/> High Radiation Area | <input type="checkbox"/> USQ |
| <input checked="" type="checkbox"/> Other <u>DOE Guidance Letter</u> | |

Date Determined to be N/A or a PAAA Noncompliance: 10/30/96 (mm/dd/yy)

If it has been determined that this is a noncompliance, answer the following questions.

Rule Involved: (check as appropriate)

☐ 10 CFR 830.120 (QA) ☐ 10 CFR 835 (Rad Con)

Comment: DOE/HQ guidance letter elaborates on footnote #5, Appendix D, 10 CFR 835 - release limits for surfaces contaminated with fission products enriched in Sr-90. The guidance letter specifies limits that are lower than the sensitivity of existing instrumentation at Hanford radiological facilities. Current limits provide protection to workers and the public; however, the guidance letter limits would increase the margin of protection by a small amount. The PHMC interpretive authority is pursuing programmatic implementation of the new guidance with RL.